

POSITION	INITIALS	ID NO.	DATE
	<i>m G</i>		<i>8/1/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>10</i>	<i>8-4-00</i>
FORMALITY REVIEW	<i>RE</i>	<i>21816</i>	<i>09-08-00</i>
RESPONSE FORMALITY REVIEW	<i>Request</i>	<i>925</i>	<i>03-26-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy